### Stamford Arts and Culture Grant

### Application & Budget Forms

### All questions must be completed and typed.

**Submit completed applications on or before 11:59 pm, November 21, 2023
via email to Aaron Miller at** **amiller1@stamfordct.gov****.**

**All applicants must be located in Stamford with a Stamford based address.**

1. **General Information**

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| **Applicant** |
| **Organization’s Legal Name** |
| **Mailing Address** | **City** | **State** | **Zip** |
| **Contact Person/Title** | **Phone** |
| **Email Address** | **Website** |
| **Tax ID Number** | **Annual Budget** |
| **Is your organization a 501(c)(3)?** | [ ]  **Yes** [ ]  **No** | **If Yes, include most recent 990 tax form** |  |

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| **Co-Applicant (if applicable)** |
| **Organization’s Legal Name** |
| **Mailing Address** | **City** | **State** | **Zip** |
| **Contact Person/Title** | **Phone** |
| **Email Address** | **Website** |
| **Tax ID Number** | **Annual Budget** |
| **Is your organization a 501(c)(3)?** | [x]  **Yes** [ ]  **No** | **If Yes, include most recent 990 tax form** |  |

1. **Project Information**

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| **Project Title:**  |
| **Name of Project Manager:**  |
| **Project Venue(s):** | [ ]  **Venue not known** |
| **Project must occur between January 1, 2024 and December 31, 2024** |
| **Project Start Date:**  | **Project End Date:**  |
| **Total Project Budget: $**  | **Amount Requested ($15,000 Max): $**  |
| **Project Discipline:** Check one discipline/category that best represents your project

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| --- | --- | --- |
| [ ]  Dance | [ ]  Multidisciplinary | [ ]  Theatre |
| [ ]  Film & Video | [ ]  Music & Opera | [ ]  Visual Arts |
| [ ]  Literature & Humanities | [ ]  Media (projection, video game, technology-based art) |  |

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###### 3. Project Description

###### 3a. Describe the project for which funds are requested and explain how it addresses the purposes of the grant. (300 words max)

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**3b. How will you promote and advertise this project to ensure maximum participation and access by community residents and/or the general public and specify the number of people will your project serve. (200 words max)**

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**3c. Describe in detail the public component of your project, including information about the audience as well as the geographic area or community served. (200 words max)**

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**3d. Does your program take place in a handicapped accessible location?** [x]  **Yes** [ ]  **No**

**If No - How will you make accommodations for people with disabilities? (200 words max)**

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**3e. If you do not receive full funding for your project how do you intend to proceed? How will you alter the project? (200 words max)**

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**3f. What tools will you use to collect the information you need to measure your success?
I.e. Discuss your program evaluation methods. (200 words max)**

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**3g. If you receive city funding, please state for what project or program and for how much?**

**5. Project Timeline**

The timeline is designed to assist you in planning your project. Please list, as best you can, all tasks that you expect to carry out as part of this project, and the dates you anticipate each task will begin and end.

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| **Task Description*****e.g. fundraising, securing a venue, confirming artists, publicity and marketing*** | **Expected Start Date** | **Expected End Date** |
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**6. Appended Material & Work Samples**

**ALL APPLICANTS MUST ELECTRONICALLY SUBMIT THE FOLLOWING:**

* Resume(s) of *principal* staff members or volunteers responsible for the project
* A List of the name and affiliation of board or advisory committee members
* Resume(s) and letter(s) of commitment from artist(s) to be engaged for project supported with grant funding
* Work samples of recent projects *(less than 5 years ago)* including website links, videos, photos, presentations, and PDF version of brochures, newspaper articles, and/or programs**(3 items max)**

**7. Project Budget (Table inserted as an Excel Worksheet - Double click to activate.)**

Provide a clear profile of both project income and planned expenditures.

**Grant Funds Requested** = How much are you requesting and how will funds be spent?

**Other Cash Contributions** = How will you use the organization’s cash on hand?

**In-Kind Contributions** = How will non-cash contributions, from other sources, be applied to the project?

**Total Project Funds** = This column will calculate automatically. It shows the total cost of your project.



##### 8. Certification of Application (Unsigned applications will not be accepted)

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| Please check to acknowledge compliance:[ ]  I have read and understand the Stamford Arts & Culture Grant guidelines and all program personnel will comply with and are made subject to said guidelines.[ ]  The applicant/organization agrees to comply with all governmental regulations concerning Affirmative Action compliance and Title II of the Americans with Disabilities Act of 1990. The applicant/organization agrees not to discriminate on the basis of disability in admission to, assess to, or operations of its programs, services, or activities and to not discriminate on the basis of disability in its hiring or employment practices as provided by Title II of the Americans with Disabilities Act of 1990.[ ]  All publicity must include: **“Supported by the City of Stamford Arts & Culture Grant”** and the Stamford Arts & Culture Commission logo (where applicable)[ ]  The undersigned Agency hereby agrees:1. To provide such liability insurance as will adequately protect the City of Stamford, and its officers, agents and employees from any claims for injuries to persons and damage to property.
2. To indemnify and hold harmless the City, its officers, agents and employees, from and, if requested, shall defend them against any loss, cost, damage, injury, liability, and claim for injury to or death of a person, including employees of the Agency or loss of or damage to property, resulting directly or indirectly from the Agency’s performance of activities for which it is being granted funding by the City of Stamford, or by any omission to perform some duty imposed by law or agreement upon the Agency, its officers, agents and employees. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts, and related costs and the City’s cost of investigating any claims against it.

**Authorizing Signature**:“My signature below certifies that the information contained in this application, including all attachments and supporting material, is true and correct, to the best of my knowledge. The undersigned certifies that he or she is a principal officer of the applicant organization with authority to obligate it. The undersigned also certifies that: (1) the funds, if granted, shall be used only for the purpose described above; (2) the applicant shall comply in all respects with the program guidelines for this grant; and (3) failure to comply with the covenants contained herein may necessitate the repayment of all grant funds.” |
| Signature: (Double-click X above to sign) | Date: |
| Name & Title:  |
| Organization:  |